

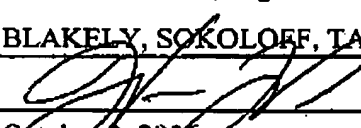



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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application No.	09/965,596	
	Filing Date	September 26, 2001	
	First Named Inventor	James Mercs	
	Art Unit	2615	
	Examiner Name	Justin I. Michalski	
Total Number of Pages in This Submission	16	Attorney Docket Number	80398P118C

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 60px; width: 100%;"></div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	William W. Schaal, Reg. No. 39,018 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	October 2, 2006

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office.			
Typed or printed name	Susan McFarlane		
Signature		Date	October 2, 2006

Based on PTO/SB/21 (09-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wtr) 11/30/2005.  
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## FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27.

**TOTAL AMOUNT OF PAYMENT** (\$) 0.00

### Complete If Known

Application Number 09/965,596  
Filing Date September 26, 2001  
First Named Inventor James Merce  
Examiner Name Justin I. Michalski  
Art Unit 2615  
Attorney Docket No. 80398P118C

### METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_  
☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayment of fee(s) ☒ Credit any overpayments  
under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

### FEE CALCULATION

#### 1. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
20	0	60.00	\$0.00
Independent Claims	0	200.00	\$0.00
Multiple Dependent			

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description
1202	2202	50	25	Claims in excess of 20
1201	2201	200	100	Independent claims in excess of 3
1203	2203	300	180	Multiple Dependent claims, if not paid
1204	2204	700	395	**Reissue independent claims over original patent
1205	2205	300	150	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (1) (\$) 0.00

\*\*for number previously paid, if greater, For Reissues, see below

#### 2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description
1051	2051	130	65	Surcharge - late filing fee or oath
1052	2052	50	25	Surcharge - late provisional filing fee or cover sheet
2053	2053	130	130	Non-English specification
1251	2251	120	60	Extension for reply within first month
1252	2252	450	225	Extension for reply within second month
1253	2253	1,020	510	Extension for reply within third month
1254	2254	1,580	795	Extension for reply within fourth month
1255	2255	2,160	1,080	Extension for reply within fifth month
1401	2401	500	250	Notice of Appeal
1402	2402	500	250	Filing a brief in support of an appeal
1403	2403	1,000	500	Request for oral hearing
1451	2451	1,510	1,510	Petition to institute a public use proceeding
1460	2460	130	130	Petitions to the Commissioner
1807	1807	50	50	Processing fee under 37 CFR 1.17(a)
1808	1808	180	180	Submission of Information Disclosure Sheet
1809	1809	780	395	Filing a submission after final rejection (37 CFR § 1.120(a))
1810	2810	790	395	For each additional invention to be examined (37 CFR § 1.120(b))

Other fee (specify):

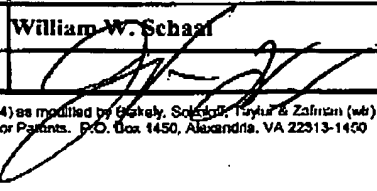
SUBTOTAL (2)

(\$)

### Fee Paid

### SUBMITTED BY

Complete (if applicable)

Name (Print/Type) <u>William W. Schaefer</u>	Registration No. (Attorney/Agent) <u>39,018</u>	Telephone <u>(714) 557-3800</u>	
Signature 	Date <u>10/02/06</u>		

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wb) 12/15/2004.  
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**FEE TRANSMITTAL  
for FY 2005**

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☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 0.00

**Complete if Known**

Application Number	09/965,596
Filing Date	September 26, 2001
First Named Inventor	James Mercs
Examiner Name	Justin I. Michalski
Art Unit	2615
Attorney Docket No.	80398P118C

**METHOD OF PAYMENT (check all that apply)**

☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) ☒ Credit any overpayments

under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

**FEE CALCULATION****1. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
20	0	50.00	\$0.00
Independent Claims	0	200.00	\$0.00
Multiple Dependents			

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	300	2203	180	Multiple Dependent claim, if not paid
1204	790	2204	306	**Reissue independent claims over original patent
1205	300	2205	150	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (1)

(\$) 0.00

\*\*or number previously paid, if greater. For Reissues, see below

**2. ADDITIONAL FEES**

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1051	130	2051	65	Surcharge - late filing fee or oath
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet
2053	130	2053	130	Non-English specification
1251	120	2251	80	Extension for reply within first month
1252	450	2252	225	Extension for reply within second month
1253	1,020	2253	510	Extension for reply within third month
1254	1,500	2254	795	Extension for reply within fourth month
1255	2,160	2255	1,080	Extension for reply within fifth month
1401	500	2401	250	Notice of Appeal
1402	500	2402	250	Filing a brief in support of an appeal
1403	1,000	2403	500	Request for oral hearing
1451	1,510	2451	1,510	Petition to institute a public use proceeding
1460	130	2460	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)
1808	180	1808	180	Submission of Information Disclosure Stmt
1809	790	1809	306	Filing a submission after final rejection (37 CFR § 1.128(a))
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.120(b))

Other fee (specify)

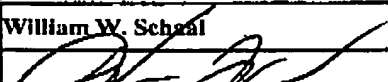
SUBTOTAL (2)

(\$)

Fee Paid

**SUBMITTED BY**

Complete (if applicable)

Name (Print/Type)	William W. Schaal	Registration No. (Attorney/Agent)	39,018	Telephone	(714) 557-3800
Signature		Date	10/02/06		

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (WR) 12/15/2004.  
SEND TO: Commissioner for Patents, P O Box 1450, Alexandria, VA 22313-1450

Appl. No. 09/965,596  
Amdt. Dated 10/02/2006  
Reply to Office Action of 06/30/2006

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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Application. No.	:	09/965,596	Confirmation No.	3700
Applicant	:	James Mercks		
Filed	:	9/26/2001		
TC/A.U.	:	2615		
Examiner	:	Justin I. Michalski		
Docket No.	:	080398.P118C		
Customer No.	:	8791		

Commissioner for Patents  
PO Box 1450  
Alexandria VA 22313-1450

**AMENDMENT**

Sir:

In response to the Office Action of June 30, 2006 please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims, which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 7 of this paper.